



September 18, 2003

Mayor Seng and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Salem FB, d.b.a. Fast Break Northwoods, 8350 Northwoods Drive requesting a class B liquor license.

Salem FB has purchased this location which was previously known as Buggy Bath East, which held a class B/K liquor license.

Douglas Morris will remain as the manager for this location. Information on Mr. Morris will be omitted as he was approved by the Council on May 5th 2003 as the manager of the liquor license held by Buggy Bath East.

Stockholder information on Salem FB has been included for your review.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police



Police Department
575 South 10th Street - Lincoln, Nebraska 68508 / Phone: 402-441-7204 / Fax: 402-441-8492 / Web: www.ci.lincoln.ne.us
A nationally accredited law enforcement agency



STATE OF NEBRASKA

Set date 7-21-03
PH: 10-13-03



Mike Johanns
Governor

City Clerk
County/City Bldg
555 S 10th
Lincoln NE 68508

FILED
CITY CLERK'S OFFICE

SEP 17 PM 3:37 September 16, 2003

CITY OF LINCOLN
NEBRASKA

106627
44

NEBRASKA LIQUOR CONTROL COMMISSION
Forrest D. Chapman
Executive Director
301 Centennial Mall South, 5th Floor
P.O. Box 95046
Lincoln, Nebraska 68509-5046
Phone (402) 471-2571
Fax (402) 471-2814
TRS USER 800 833-7352 (TTY)

Dear Local Governing Body:

Salem FB LLC
dba Fast Break Northwoods
8350 Northwoods DRIVE
CLASS B

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

- 1) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose **NOT** to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body.
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Licensing Division

Enclosures
Rhonda R. Flower
Commissioner

Bob Logsdon
Chairman

R.L. (Dick) Coyne
Commissioner

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

FORM 35-4001
REV. 12/99

APPLICATION FOR LICENSE

Nebraska Liquor Control Commission
PO Box 95046, 301 Centennial Mall South
Lincoln, NE 68509-5046

<http://www.nol.org/home/NLCC/>
Phone: (402) 471-2571
Fax: (402) 471-2814

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NEBRASKA LIQUOR
CONTROL COMMISSION

INSTRUCTIONS: Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application, Commission form 4178 3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4251 5. Fingerprint cards and processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders/member holding over 25% stock/interest. 6. All applications must be typewritten or printed clearly. 7. Submit in Triplicate

CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH

Class of License (Please check applicable class)	Registration Fee	Licenses Fees	Corporate Surety Bond
<input type="checkbox"/> A Beer, On Sale Only – Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> F Beer, On Sale Only – Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input checked="" type="checkbox"/> B Beer, Off Sale Only – Indicate Inside or Outside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> J Wine, Beer, On Sale Only – Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> I Spirits, Wine, Beer, On Sale Only – Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> D Spirits, Wine, Beer, Off Sale Only – Inside Corporate Limits	\$45.00	\$150.00	exempt
<input type="checkbox"/> DI Spirits, Wine, Beer, Off Sale only – within extraterritorial zoning jurisdiction	\$45.00	\$150.00	exempt
<input type="checkbox"/> C Spirits, Wine, Beer On & Off Sale – Inside Corporate Limits	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> M Bottle Club (Spirits, Wine, Beer, on Sale)	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> H Nonprofit Corporation	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> K Wine Only, Off Sale	\$45.00	Collected at Local Level	exempt
<input type="checkbox"/> O Boat	\$45.00	\$ 50.00	exempt
<input type="checkbox"/> V Manufacturer of Beer, Wine & Distilled Spirits	\$45.00	Varies \$100 to \$1,000	\$10,000 min.
<input type="checkbox"/> X Wholesale Liquor	\$45.00	\$500.00	\$ 5,000 min.
<input type="checkbox"/> W Wholesale Beer	\$45.00	\$250.00	\$ 5,000 min.
<input type="checkbox"/> Y Farm Winery	\$45.00	\$250.00	\$ 1,000 min.
<input type="checkbox"/> L Craft Brewery (Brew Pub)	\$45.00	\$250.00	\$ 1,000 min.

TYPE OF APPLICATION

CORPORATE SURETY BOND INFORMATION

Type of application being applied for
(place appropriate number in box)

3

- 1= Individual License requires
Form 1 to be attached.
2= Partnership License requires
Form 2 to be attached.
3= Corporate License requires
Form 3 and 4 and Manager
Application be attached.

Bond Company – for Classes L V W X Y only

Start Date Month/Day/Year

Bond Number

SECTION A - LOCATION INFORMATION - Must be completed by all applicants

Trade Name (name of business)

Telephone Number at premise to be licensed

Fast Break Northwoods

402-489-1222

1) Street Address of Proposed licensed premise

2) Mailing Address for receipt of

8350 Northwoods Drive

Liquor Control Commission mailings

Is this located inside the city limits

P.O. Box 81006

Circle YES/NO

Lincoln, NE 68501

City County Zip Code

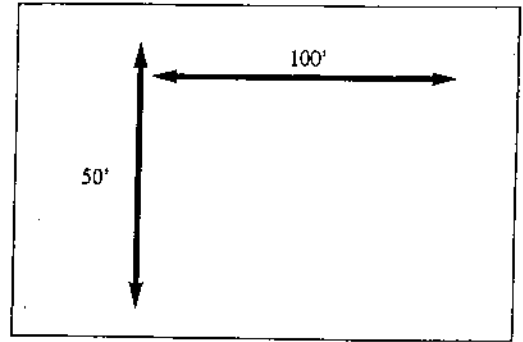
City County Zip Code

Lincoln Lancaster 68505

Lincoln Lancaster 68501

DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED

In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg. is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.

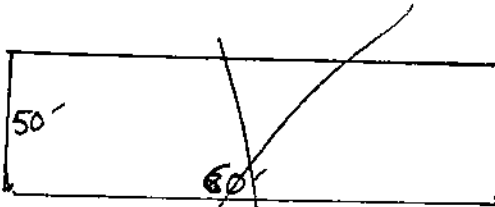


Example: East portion approximately 50' x 100' of main floor of 3 story building plus basement approximately 30' x 50' at the East end.

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NEBRASKA ALCOHOL
CONTROL COMMISSION



One Level

1 story bldg approx 71' x 40' excluding
car wash bay

READ CAREFULLY. Answer completely and accurately.

Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor or violation of a federal or state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

No

2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).	Yes		B50213 See Attached
3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.	Yes		
4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.	Yes		West Gate Bank
5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.		No	
6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.		No	
7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?		No	
8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.		No	
9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the persons exact duties.		No	
10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write checks and/or make withdrawals on accounts at such institutions.	West Gate Bank Charles R. Salem		
11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.	1648 South #43562 3100 NW 12th #54995 630 W VanDorn #51960 2200 N 48th Applied		
12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.	Doug Morris 50 hours		
13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.	He is currently the manager		
14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed).	Deed will be transferred at closing		
15. When do you intend to open for business?	9-11-2003		

NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY, STATE)
Charles Robert Salem 2825 Stratford	1945	Present	Lincoln, NE
Sherene Lee Salem 2825 Stratford	1945	Present	Lincoln, NE
Carolyn S. Otte 3003 South 31st	1983	Present	Lincoln, NE
Robert C. Otte 3003 South 31st	1983	Present	Lincoln, NE

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

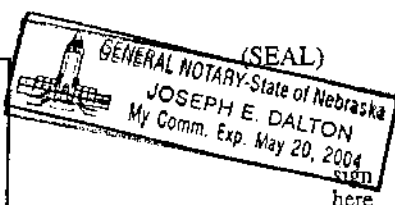
Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders/members (holding more than 25 % of the stock or interest), officers, directors and spouses must sign. Full names only, initials not acceptable.

sign here Charles R. Salem
sign here Sherene L. Salem
sign here Carolyn S. Otte
sign here Robert C. Otte

sign here _____
sign here _____
sign here _____
sign here _____

Subscribed in my presence and sworn to before me this 27 day of June, 2003.

In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.



Joseph E. Dalton

Notary Public Signature

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NEBRASKA LIQUOR CONTROL COMMISSION
AFFIDAVIT OF NON PARTICIPATION

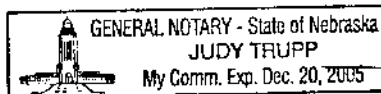
NEBRASKA LIQUOR
CONTROL COMMISSION

The undersigned individual acknowledges that he/she will have no interest, directly or indirectly, in the operation or profit of the business, as prescribed in Section §53-125(13) of the Liquor Control Act. Such individual shall not tend bar, make sales, serve patrons, stock shelves, write checks, sign invoices, represent themselves as owner or in any way participate in the day to day operations in any capacity. Undersigned will also be waived of filing fingerprint cards, however, has disclosed any violation(s) on application.

Sharon T. Salem

Signature of Spouse

SUBSCRIBED in my presence and sworn to before me this 9th day of September, 2003.



Judy Trupp
Signature of Notary Public

The licensee/applicant understands that he/she is responsible for compliance with the conditions set out above, and that if such terms are violated, the Commission may cancel or revoke the license.

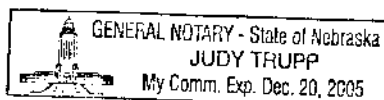
Charles R. Salem

Signature of Licensee/Applicant

Charles R. Salem

Print Name of Licensee/Applicant

SUBSCRIBED in my presence and sworn to before me this 9th day of September, 2003.



Judy Trupp
Signature of Notary Public

FORM 35-4178
REV 2/01

printed on recycled paper

Corporation/LLC Application for License - Form 3

Nebraska Liquor Control Commission

INSTRUCTIONS:

- 1) Application and application for manager must be typewritten and submitted in triplicate
- 2) Fingerprint cards (2 cards per person) must be submitted for: a) each stockholder owning over 25% of the stock, b) chief executive officer, c) proposed manager and d) all spouses
- 3) Information regarding spouses must be completed

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NEBRASKA LIQUOR
CONTROL COMMISSION

Name of Corporation That Will Hold License. Attach copy of Articles of Incorporation				Total Number of Shares (if corporation)	
Salem FB, LLC					
Corporate Street Address (1)		Mailing address for receipt of Liquor Control Commission Mailings		Corporate Telephone Number	
1234 North 14th Street		P.O. Box 81006		402-476-3333	
City	County	State	Zip Code		
Lincoln	Lancaster	NE	68501		
Name of Registered Agent		Name of Proposed Manager			
Robert R. Otte		Peggy C. Roeder			
IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER					
Name	Title	Date of Birth	Social Security Number		
Charles R. Salem	President				
Home Address (1)		State			
2825 Stratford Avenue		NE			
City	State	Zip Code	Home Telephone Number		
Lincoln	NE	68502	402-435-0434		

Corporation/LLC Application for License - Form 3

PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS AND SPOUSES						
Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases				Date of Birth	Title	Number of Shares/ %
NAME		Social Security Number	Tax ID#	Incorp		
AIE, Inc.					Member	50%
Spouse Name						
Salem Oil Company					Member	50%
Spouse Name						
Spouse Name						
Spouse Name						
Spouse Name						
Spouse Name						

(If Necessary, Continue on Separate Sheet)

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Corporation/LLC Application for License - Form 3

Nebraska Liquor Control Commission

Is this Corporation/LLC controlled by another Corporation? ☒ YES ☐ NO

Name of Control Corporation

AIE, Inc. - 50%
Salem Oil Company - 50%

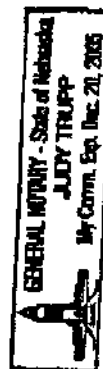
IF YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LLC. Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock owned

Please indicate below your corporate tax year with the IRS

Starting Date: January Ending Date: December

STATE OF NEBRASKA

LANCASTER County



Judy Trupp
Notary Public, State of Nebraska

Salem FB, LLC by
Salem Oil Company, Manager

By Charles R. Ralston, Pres.
PRESIDENT/MEMBER

AIE, Inc. by
Robert R. Ralston
SECRETARY/MEMBER

In Compliance with ADA, this form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format

Exhibit "A"

Salem FB, LLC – Organization chart

Salem FB, LLC

- Salem Oil Company, A Nebraska Corporation
Manager / Member - Owns 50% of Salem FB, LLC
Charles R. Salem, Pres. 100% Owner
- AIE, Inc., A Nebraska Corporation
Manager / Member - Owns 50% of Salem FB, LLC
Robert R. Otte, Pres 50% owner
Carolyn S. Otte, Sec/Trea 50% owner

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NEBRASKA LIQUOR
CONTROL COMMISSION

Please submit in Triplicate

Return to: Nebraska Liquor Control Commission, PO Box 95046
301 Centennial Mall So., Lincoln NE 68509

SEP 09 2003

Phone: (402) 471-2571 Fax: (402) 471-2814 Web address: <http://www.nol.org/home/NLCC/>

NEBRASKA LIQUOR CONTROL COMMISSION

LIQUOR LICENSE INFORMATION

NAME OF LICENSED CORPORATION Salem FB, LLC		CLASS & LICENSE NUMBER B	
TRADE NAME OF LICENSED PREMISE Fast Break Northwoods			
STREET ADDRESS OF LICENSED PREMISE 8350 Northwoods Drive	CITY Lincoln	COUNTY Lancaster	ZIP CODE 68504

On behalf of the corporation, I designate this individual as corporate manager.

Signature of Corporate President/CEO:



APPLICANT INFORMATION (MUST BE 21 OR OVER)

NAME (LAST, FIRST, MIDDLE, MAIDEN) Morris, Douglas Brian	SEX F <input checked="" type="radio"/> M	SOCIAL SECURITY NUMBER	DATE OF BIRTH	PLACE OF BIRTH Beatrice, NE
HOME STREET ADDRESS 600 Sunnyslope Road	CITY Lincoln	COUNTY Lancaster	STATE NE	ZIP CODE 68505
HOME TELEPHONE NUMBER (402) 489-8618	BUSINESS TELEPHONE NUMBER (402) 489-1222	DRIVERS LICENSE NUMBER & STATE NE		

SPOUSE'S INFORMATION (IF NOT MARRIED INDICATE)

FULL NAME (LAST, FIRST, MIDDLE, MAIDEN) Morris, Carol Ann Meints	SOCIAL SECURITY NUMBER	DRIVERS LICENSE NUMBER & STATE NE
DATE OF BIRTH:	PLACE OF BIRTH Beatrice, NE	

1. **READ CAREFULLY.** Answer completely and accurately.

Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

☐ Yes ☒ No

2. Have you or your spouse ever made application for any liquor license or manager for any liquor license? IF YES, for what premise give license number and date.

☒ YES

☐ NO

Buggy Bath East #50213 5-1-03
8350 Northwoods Dr.
Lincoln, NE 68505

3. Have you or your spouse ever made a compromise settlement for violation of such laws?

☐ YES ☒ NO

4. Do you, as a manager, have all the qualifications required by any person entitled to hold a Nebraska Liquor License?
Nebraska Liquor Control Act (§53-131.01)

☒ YES ☐ NO

SEP 09 2003

5. Have you filed fingerprint cards and **PROPER FEES** (if check, make out to the NE State Patrol), with this application?

☒ YES ☐ NO

RESIDENCES FOR THE PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE

APPLICANT: CITY & STATE	YEAR FROM TO	SPOUSE: CITY & STATE	YEAR FROM TO
Lincoln, Nebraska	1987 present	Lincoln, Nebraska	1987 present

EMPLOYERS - LIST LAST TWO EMPLOYERS

FROM	YEAR TO	NAME OF EMPLOYER	NAME OF SUPERVISOR	TELEPHONE NUMBER
10-01	01-03	Heritage Warranty Ins.	Paul Marish	402-489-7777
05-98	09-01	National Warranty Ins.	Scott Emery	402-489-1990

PERSONAL OATH AND CONSENT OF INVESTIGATION - MUST BE SIGNED BY APPLICANT & SPOUSE

STATE OF NEBRASKA)
) SS
COUNTY OF Lancaster

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

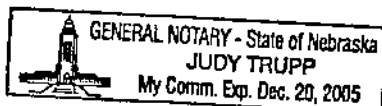
The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has NO interest directly or indirectly, an affidavit of non participation may be attached.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and inaccurate.

Douglas B. Maris
Signature of Applicant

Subscribed in my presence and sworn to before me this 9th
day of September, 2003

Judy Trupp
Notary Signature & Seal



Carol A. Maris
Signature of Spouse (if applicable)

Subscribed in my presence and sworn to before me this 9th
day of September, 2003

Judy Trupp
Notary Signature & Seal

